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PTO/SB/05 (03-01) Approved for use through 10/31/2002, OMB 0651-0032 U.S. Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

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UTILITY PATENT APPLICATION TRANSMITTAL

Attorney Docket No. Devise MURRA First Inventor INVENTOR Title

(Only for new nonprovisional applications under 37 CFR 1.53(b)) Express Mail Label No. APPLICATION ELEMENTS Assistant Commissioner for Patents ADDRESS TO: Box Patent Application See MPEP chapter 600 concerning utility patent application contents. Washington, DC 20231 Fee Transmittal Form (e.g., PTO/SB/17) CD-ROM or CD-R in duplicate, large table or (Submit an original and a duplicate for Computer Program (Appendix) Applicant claims small entity status. 8. Nucleotide and/or Amino Acid Sequence Submission See 37 CFR 1 27. (if applicable, all necessary) specification [Total Pages (preferred arrangement set forth below) 3.❤ Computer Readable Form (CRF) - Descriptive title of the invention Specification Sequence Listing on: - Cross Reference to Related Applications - Statement Regarding Fed sponsored R & D i. L CD-ROM or CD-R (2 copies); or - Reference to sequence listing, a table, paper or a computer program listing appendix Statements verifying identity of above copies - Background of the Invention Brief Summary of the Invention ACCOMPANYING APPLICATION PARTS - Brief Description of the Drawings (if filed) - Detailed Description 9. Assignment Papers (cover sheet & document(s)) - Claim(s) 37 CFR 3.73(b) Statement Power of - Abstract of the Disclosure 10. (when there is an assignee) Attorney 4 English Translation Document (if applicable) Drawing(s) (35 U S.C 113) [Total Sheets 11 Copies of IDS Information Disclosure 5. Oath or Declaration [Total Pages 12. Citations Statement (IDS)/PTO-1449 Newly executed (original or copy) Copy from a prior application (37 CFR 1.63 (d)) 13. Preliminary Amendment Return Receipt Postcard (MPEP 503) (for continuation/divisional with Box 18 completed) (Should be specifically itemized) Certified Copy of Priority Document(s) (if foreign priority is claimed) **DELETION OF INVENTOR(S)** 15. Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR Nonpublication Request under 35 U.S.C. 122 16. 1 63(d)(2) and 1 33(b). (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent. Application Data Sheet. See 37 CFR 1.76 17. Other: 18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76. Continuation Divisional Continuation-in-part (CIP) of pnor application No _ Prior application information Group Art Unit. For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts. 19. CORRESPONDENCE ADDRESS Customer Number or Bar Code Label Correspondence address below Name Address City State Zip Code 95630 Country ULS. 916-983-728**9** Telephone Fax Name (Print/Type) Registration No. (Attorney/Agent)

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.



PTO/SB/17 (11-01)
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FEE TRANSMITTAL for FY 2002

Patent fees are subject to annual revision.

Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT

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Complete if Known					
Application Number	31 LFR 1.63				
Filing Date	12-28-01				
First Named Inventor	Dewise R. mulkay				
Examiner Name	, ,				
Group Art Unit					
Attorney Docket No.					

METHOD OF PAYMENT (check all that apply)		F	EE CALCULATION (continued)			
Check Credit card Money Order None	3. ADDITIONAL FEES					
Deposit Account.	Large Entity	Large Entity Small Entity				
Deposit Account	Fee Fee Code (\$)	Fee Fee Code (\$)		Fee Paid		
Number Deposit	105 130	205 65	Surcharge - late filing fee or oath			
Account Name	127 50	227 25	Surcharge - late provisional filing fee or cover sheet			
The Commissioner is authorized to: (check all that apply) Charge fee(s) indicated below Credit any overpayments	139 130	139 130	Non-English specification			
☐ Charge fee(s) indicated below ☐ Credit any overpayments ☐ Charge any additional fee(s) during the pendency of this application	147 2,520	147 2,520	For filing a request for ex parte reexamination			
Charge fee(s) indicated below, except for the filing fee	112 920*	112 920*	Requesting publication of SIR prior to			
to the aboveidentified deposit account	113 1.840*	113 1.840*	Examiner action			
FEE CALCULATION	110 1,040	113 1,040	Requesting publication of SIR after Examiner action			
1. BASIC FILING FEE	115 110	215 55	Extension for reply within first month			
Large Entity Small Entity Fee Fee Fee Fee Fee Description	116 400	216 200	Extension for reply within second month			
Fee Fee Fee Fee Description Code (\$) Code (\$) Fee Paid	117 920	217 460	Extension for reply within third month			
101 740 201 370 Utility filing fee	118 1,440	218 720	Extension for reply within fourth month			
106 330 206 165 Design filing fee	128 1,960	228 980	Extension for reply within fifth month			
107 510 207 255 Plant filing fee	119 320	219 160	Notice of Appeal			
108 740 208 370 Reissue filing fee	120 320	220 160	Filing a brief in support of an appeal			
114 160 214 80 Provisional filing fee	121 280	221 140	Request for oral hearing			
SUBTOTAL (1) (\$) 370-	138 1,510	138 1,510	Petition to institute a public use proceeding			
	140 110	240 55	Petition to revive - unavoidable			
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE	141 1,280	241 640	Petition to revive -unintentional			
Extra Claims below Fee Paid	142 1,280	242 640	Utility issue fee (or reissue)	77×39		
Total Claims 20** = X	143 460	243 230	Design issue fee	<u> </u>		
Claims 3** = X = Multiple Dependent	144 620	244 310	Plant issue fee			
	122 130	122 130	Petitions to the Commissioner			
Large Entity Small Entity	123 50	123 50	Processing fee under 37 CFR 1.17(q)			
Fee Fee Fee Fee Description	126 180	126 180	Submission of Information Disclosure Stmt			
Code (\$) Code (\$) 103 18 203 9 Claims in excess of 20	581 40	581 40	Recording each patent assignment per property (times number of properties)			
102 84 202 42 Independent claims in excess of 3	146 740	246 370	Filing a submission after final rejection			
104 280 204 140 Multiple dependent claim, if not paid	149 740	040 070	(37 ČFR § 1 129(a))			
109 84 209 42 ** Reissue independent claims over original patent		249 370	For each additional invention to be examined (37 CFR § 1.129(b))			
110 18 210 9 ** Reissue claims in excess of 20 and over original patent	179 740	279 370	Request for Continued Examination (RCE)			
and over original patent	169 900	169 900	Request for expedited examiliation of a design application	11		
SUBTOTAL (2) (\$) 375,500	Other fee (sp	ecify)				
**or number previously paid, if greater; For Reissues, see above	*Reduced by	Basic Filing	Fee Paid SUBTOTAL (3) (\$)	7000		

SORWILLED BA		Complete (if applicable)
Name (Print/Type)	Denise K. MURRAY Registration No. (Attorney/Agent)	Telephone 96-983-7237
Signature	Dening Mukay	Date 12-28-61
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WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

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of Appeals and Interferences	Please type a plus sign (+) inside this Under the Paperwork Reduction Act of 1995, no pe	<u></u>	U.S. Patent and Tradem	PTO/SB/21 (08 ved for use through 10/31/2002. OMB 0651-0(lark Office: U.S. DEPARTMENT OF COMME
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FORM (to be used for all correspondence after initial filing) First Named Inventor Group Art Unit Examiner Name Total Number of Pages in This Submission Fee Transmittal Form Fee Attached Drawing(s) After Final After Final Petition Petition Petition Petition Petition Power of Attorney, Revocation Change of Correspondence Address Extension of Time Request Express Abandonment Request Express Abandonment Request Information Disclosure Statement Cop, Number of CD(s) First Named Inventor Group Art Unit Examiner Name Examiner Name After Allowance Communication to Group Appeal Communication to Board of Appeals and Interferences Appeal Communication to Group (Appeal Notice, Brail, Reply Brail) Proprietary Information Proprietary Information Status Letter Other Enclosure(s) (please identify below): Terminal Disclaimer Request for Refund Information Disclosure Statement CD, Number of CD(s) Response to Missing Parts/ Incomplete Application Response to Missing Parts Response to Missing Parts	TRANSMIT	ΓTAL	Filing Date	T
Total Number of Pages in This Submission Attorney Docket Number	FORM		First Named Inventor	
Total Number of Pages in This Submission 9	(to be used for all correspondence	after initial filing)	Group Art Unit	0
ENCLOSURES (check all that apply) See Transmittal Form			Examiner Name	
Fee Transmittal Form Fee Attached Drawing(s) After Final After Final Petition Petition to Convert to a Provisional Application Affidavits/declaration(s) Extension of Time Request Information Disclosure Statement Cortified Copy of Priority Document(s) Response to Missing Parts Assignment Papers (for an Application) After Allowance Communication to Group Appeal Communication to Board of Appeal Communication to Group Appeal Communication to Board of Appeal Communication to Group Appeal Communication Appeal Communicat	Total Number of Pages in This Su	ıbmission 9	Attorney Docket Number	
Fee Transmittal Form Fee Attached Fee Attached Drawing(s) After Allowance Communication to Group Appeal Communication to Board of Appeals and Interferences Licensing-related Papers After Final Petition Petition Petition to Convert to a Provisional Application Proprietary Information Proprietary Information Status Letter Other Enclosure(s) (please identify below): Express Abandonment Request Request for Refund Information Disclosure Statement CD, Number of CD(s) Response to Missing Parts/ Incomplete Application Response to Missing Parts		ENCL	OSURES (check	all that apply)
	Fee Attached Amendment / Reply After Final Affidavits/declaration(s) Extension of Time Request Express Abandonment Request Information Disclosure Statement Certified Copy of Priority Document(s) Response to Missing Parts/ Incomplete Application Response to Missing Parts	Drawing Licensin Petition Provisio Change Address Termina Request	Application) ag(s) ag-related Papers to Convert to a anal Application of Attorney, Revocation of Correspondence al Disclaimer t for Refund	to Group Appeal Communication to Board of Appeals and Interferences Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) Proprietary Information Status Letter Other Enclosure(s) (please
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Firm or Individual name Devise Revee. Murray Signature Date 12-28-01	I hereby certify that this correspondence is bein mail in an envelope addressed to: Commission	ng deposited with the	e United States Postal Service	e with sufficient postage as first class
Firm or Individual name Perse Revee, Murray Signature Date 12-28-0) CERTIFICATE OF MAILING I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class.	Typed or printed name Dew			
Firm or Individual name Perse Revee, Murray Signature Date 12-28-01 CERTIFICATE OF MAILING I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, Washington, DC 20231 on this date:	Signature 1)			12-28-01

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I Denise R. Murray would like to get a patent for this product that I have invented. I have already been through submission for product search with INVENTION SUBMISSION CORPORATION and they said there was no other product like this one. Please see paperwork inside . Also I think I included all the information that you need ,I don't know if it is all right or not please write to me if it isn't done correctly. Thank you .